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Bib Data Sheet

CONFIRMATION NO. 8467

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APPLICANTS  
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\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/412,783 09/24/2002  
*verified EIC 19 AUG 2005*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
 FRANCE 02 10450 08/21/2002 *verified EIC 19 AUG 2005*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 11/18/2003

|  |                               |                        |                       |                            |
|--|-------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (e-d) conditions met<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged<br><i>EIC</i><br>Examiner's Signature Initials | STATE OR<br>COUNTRY<br>FRANCE | SHEETS<br>DRAWING<br>3 | TOTAL<br>CLAIMS<br>23 | INDEPENDENT<br>CLAIMS<br>1 |
|--|-------------------------------|------------------------|-----------------------|----------------------------|

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TITLE  
 Receptacle having a reinforced wall

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|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>934 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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